DSP

General Description:

Day Supports- Partial Day (DSP) provides hourly support, supervision and habilitation for individuals and groups of up to 20 children and adults. DSP provides a safe, non-residential, community habilitation program in a structured programmatic setting, other naturally occurring environment or community setting where people can gather in groups during the day *after normally occurring school or training activities* have ended for the day or week to avoid becoming isolated and participate in and contribute to their community. DSP maintains or improves a person's dexterity, stamina, memory, personal safety, interpersonal relations, self-help, communication, mobility, hygiene and other functional abilities and life skills. Services may include assistance with feeding and toileting, and implementation of behavioral support plans. DSP may be used to provide appropriate staff to maintain the health and safety of persons. DSP programs should be operational for at least four hours on regular business days to allow for staggered arrivals and departures.

Limitations:

1. DSP is intended for persons with intellectual and developmental disabilities and related conditions; DSP is not available as a self-administered service; DSP is available through provider-based services only.

2. DSP services may on occasion occur in the person's home or residence, though this service is primarily intended to be operated from a structured programmatic setting within the community.

3. DSP services rendered consistently in a non-site setting or facility in which four or more persons participate at any one time shall be licensed in accordance with Utah Administrative Code R501, [http://rules.utah.gov/publicat/code/r501/r501.htm].

4. Services that are provided to the person and paid for by the person's school, including transportation services, shall not be submitted to DHS/DSPD for duplicate payment.

5. Payment for transportation of persons to and from the location where DSP services are delivered is not included in this service.

6. DSP may not be billed at the same time as any other service except for BC1, BC2, BC3, PM1 or PM2.

7. DSP services are not intended to be used in conjunction with or to supplement DSG or DSI services and may NOT be ordered for individuals receiving DSG or DSI.

8. If not otherwise specified on the worksheet, the minimum allowable DSP staff supervision ratio is not to exceed 1:6 [one (1) staff to six (6) people].

9. In no case will more than four persons in home settings be served by the Contractor at any time; this requirement includes the provider's own minor children under the age of 14 in the case of services rendered in a provider's home.

Population Served:

The Contractor will serve people currently receiving services from DHS/DSPD with intellectual and developmental disabilities and related conditions as defined in Utah Administrative Code R539-1. [http://rules.utah.gov/publicat/code/r539/r539.htm]

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50 Contractor's Qualifications:

- If site based services are provided to four (4) or more persons at any one time, the Contractor shall have all applicable licenses as prescribed in Utah Administrative Code R501
- [http://rules.utah.gov/publicat/code/r501/r501.htm] to operate and provide the particular type of services being offered and shall comply with insurance requirements and any local ordinances or permits. Non-licensed
- Contractor shall be certified by DHS/DSPD as an authorized provider of services to persons with disabilities in

accordance with Utah Code § 62A-5-103. [http://www.le.state.ut.us/~code/TITLE62A/62A05.htm]

Contractor shall be enrolled as an approved Medicaid provider with the Utah Department of Health and agree to allow DHS/DSPD to bill Medicaid on its behalf for covered Medicaid services included in the rate paid by DHS/DSPD to the Contractor. Contractor shall also agree to participate in any DHS/DSPD provided Medicaid training.

Contractor shall have established policies and procedures, a copy of which shall be maintained and readily accessible at each facility. These policies and procedures shall: a). Demonstrate the development and posting of an evacuation plan in each program site, quarterly training on evacuation procedures and documentation of quarterly evacuation drills, and b) provide provisions to govern the handling, storage, disposal and theft prevention of medication.

Contractor shall ensure that DSP staff are trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Contractor shall be under a DHS/DSPD contract to provide DSP.

Contractor's Staff Qualifications:

Staff shall demonstrate competency in providing DSP services, as determined by the Contractor, in addition, all applicable education, and training shall be completed before performing any work for persons without supervision.

DSP staff shall be trained in the Staff Training Requirements as outlined in applicable General Requirements, Home and Community Based Waiver, rule, statute, and contract.

Staff shall pass a Bureau of Criminal Identification (BCI) background check through the DSP, Office of Licensing and have a record of the BCI results in the staff record. http://rules.utah.gov/publicat/code/r501/r501-14.htm

DSP staff shall be at least 18 years of age.

Specific Training Requirements

All direct care and direct care supervisory staff shall receive specific staff training that prepares them to complete the critical job functions for this service and orients them to the person being supported by this service. Staff training shall be conducted by qualified trainers with professional experience and knowledge in providing services and supports to persons with mental retardation, related conditions and brain injury.

Staff shall complete and achieve competency in specific training areas one (1) through eight (8) within 30 days of employment or before working unsupervised with a person. Staff shall complete and achieve competency in training areas 9 through 12 within six (6) months of employment. Competency for DSP staff may include

1. Knowing where to find information or who to contact in case of a question or unusual event;

2. Medication competency:

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103 104 105			 c. Recording and documentation of self-administration of medications; and, d. Training on commonly used medications including the reason and circumstance for administration, dose, and scheduling.
106 107		3.	Recognition of illness or symptoms of health deterioration specific to the person.
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109 110		4.	Dietary issues specific to the person.
111 112		5.	Critical health care issues specific to the person.
113 114		6.	Swallowing and eating difficulties specific to the person.
115 116 117		7.	Principles of age appropriate community inclusion and natural support development specific to the person.
118 119		8.	Preferences and non-negotiable routines specific to the person.
120 121		9.	Significant functional limitations and disabling conditions specific to the person.
122 123		10.	Key elements of the Americans with Disabilities Act.
124 125		11.	Person centered assessment and plan development.
126 127		12.	How to develop and support the person's preferred work activities.
128	Direct	Serv	ice Requirements:
129 130	A.	Per	son-Centered Planning: Contractor staff shall participate in and comply with the requirements of the (S/DSPD Person-Centered Planning Process in providing services.
131 132 133 134 135 136		1.	The Contractor is responsible for implementing the applicable portion of the Individual Support Plan's Action Plan (ISP/AP). The ISP document may include the following separate documents: Action Plan, Support Strategies, including Behavior Support Plan, Psychotropic Med Plan, Staff Instruction sheet, data collection and/or Task Analysis sheet.
137 138 139		2.	Once the ISP/AP has been developed, the Contractor shall orient the person to that part of the plan that pertains to the Contractor and ensure that the person is involved in its implementation.
140 141 142		3.	The Contractor shall develop Support Strategies for the person. Contractor shall submit Support Strategies and Monthly Summaries to DHS/DSPD.
143 144 145 146		4.	The Contractor, as a member of the person's team, is required to meet at least annually (within 12 months of the last Person Centered Process meeting) to review the person's service/support requirements and to make adjustments as necessary based on the person's needs. However, it may meet more often as determined by the person or other members of the team.
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a. Identification of common medications, their effects, purpose and side effects;

b. Identification of medications and medication side effects specific to the person;

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148	5.	The Contractor shall provide emergency procedures for fire and other disasters that require the	
149		development and posting of an evacuation plan for site based services and quarterly training on	
150		evacuation procedures and documentation of quarterly evacuation drills.	
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152	6.	The Contractor under license with DHS/Office of Licensing shall assure the presence of at least one staff	
153		trained by a certified instructor, in first aid and CPR on duty with persons at all times.	
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155	7.	The Contractor shall assure the presence of staff at each licensed site that is responsible for supervision of	
156		the day-to-day operations of the site and for operation of the program.	
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158	8.	The Contractor shall develop and implement fiscal policies, such as internal controls, that separate	
159		payments from funding sources. Such policies shall be sufficient to ensure and document that any	
160		financial benefit realized by a Contractor as a result of a contract with a federal, state, county, city or	
161		other agency to use the Contractor facility, was of benefit to the persons receiving DSP.	
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163	9.	The Contractor shall develop and implement procedures regarding behavior support plans and behavioral	
164		intervention procedures that comply with Administrative Code R539-4.	
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166	10.	The Contractor shall develop and implement procedures that assure proper nutrition of the person during	
167		periods of the provision of DSP, and shall be capable of providing maintenance and support of feeding	
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169		Support:	
170	Actual type, frequency and duration of support will be defined in the person's ISP/AP based on the person's		
171	assesse	ed needs. Staffs to person ratios are established in the person's worksheet and/or ISP/AP.	
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173		<u>l keeping</u>	
174	In addition to the General Requirements for record keeping, the Contractor shall maintain accurate records, such		
175	as atte	ndance records and timesheets, of all instances of service delivery.	
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177	Rate:		
178		an hourly rate. DSP provides support to individuals and groups. Rates are determined based on the level	
179	of supp	port as determined in the ISP/Action Plan and worksheet.	
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